

**COMMISSION ON ACCREDITATION FOR CORRECTIONS  
PANEL ACTION REPORT**

Hyatt Regency-Navy Pier  
Chicago, Illinois

July 31, 2010

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Columbia County Sheriff's Office  
Columbia County Detention Center  
Appling, Georgia

Agency Representatives: Teresa Reynolds, Detention Facility Accreditation  
Manager  
Harvey Woods, Operations Lieutenant  
3DP HDGRCCDG SHHLL's 2 IIFHAFrHCLWAn  
Manager

Panel Members: Tom Stickrath, Chair  
Justin Jones  
Joe Williams

Staff: Pam Eckler

**Panel Action**

Standard #4-ALDF-1A-1S The Commissioners approved the waiver requested.

Standard #4-ALDF-1A-21 The Commissioners denied the appeal, but granted a  
.discretionary compliance.The Commissioners  
requested they conduct a study with other facilities  
to meet this standard in the future.

Standard # 4-ALDF-2A-14 The Commissioners approved the completed plan of  
action.

Standard # 4-ALDF-2A-54 The Commissioners approved the request for a  
discretionary compliance with mitigation.

Standard # 4-ALDF-4D-09 The Commissioners approved the plan of action.

Standard # 4-ALDF-4D-20 The Commissioners approved the waiver requested.

Standard # 4-ALDF-4D-22-1	The Commissioners approved the completed plan of action.
Standard # 4-ALDF-5A-09	The Commissioners denied the discretionary compliance and requested a plan of action.
Standard # 4-ALDF-5C-10	The Commissioners approved the discretionary compliance, but recommended researching other facilities and how they comply with this standard.

**Accreditation Panel Decision**

Moved:	Commissioner Jones
Seconded:	Commissioner Williams
Three-Year Accreditation:	Yes

<b><u>Accreditation Vote</u></b>	<b><u>Yes</u></b>	<b><u>No</u></b>
Commissioner Stickrath	√	
Commissioner Jonesn	√	
Commissioner Williams	√	

**Final Tally**

Mandatory	100%
Non-Mandatory	97.0%

**COMMISSION ON ACCREDITATION FOR CORRECTIONS**  
**STANDARDS COMPLIANCE REACCREDITATION AUDIT**

Columbia County Sheriff's Office  
Columbia County Detention Center  
Appling, Georgia

May 4-6, 2010

**VISITING COMMITTEE MEMBERS**

Kaye Harris, R.N., B.S., Chairperson  
RN Consultant  
111 Parkside Circle  
Port St. Joe, Florida 32456  
(850) 227-1919  
[kayeharris@gtcom.net](mailto:kayeharris@gtcom.net)

Alfred Wood  
Correctional Consultant  
335 North Main Street  
Sharon, Massachusetts 02067  
(508) 505-5075  
[bwood1957@gmail.com](mailto:bwood1957@gmail.com)

Sandra Guajardo  
Correctional Consultant  
600 US Hwy 301 Boulevard W., Ste. 202  
Bradenton, Florida 34205  
(941) 747-3011 ext. 2723  
[sdguajardo@gmail.com](mailto:sdguajardo@gmail.com)

**A. Introduction**

The audit of the Columbia County Detention Center, Columbia County Sheriff's Office, was conducted on May 4-6, 2010, by the following team: Kaye Harris, R.N., B.S., Chairperson; Alfred Wood, Member, and Sandra Guajardo, Member.

**B. Facility Demographics**

Rated Capacity: 266  
Actual Population: 248  
Average Daily Population for the last 12 months: 221  
Average Length of Stay: 7 months, 4 days  
Security/Custody Level: Maximum, Medium and Minimum  
Age Range of Offenders: 17-79  
Gender: Male/Female  
Full-Time Staff: 121  
19 Administrative Support, 99 Security, 3 Contracted Full Time Medical

**C. Facility Description**

The Columbia County Detention Facility is located in Appling, Georgia, which is northwest of Augusta, Georgia. The facility moved to this location in 1984. The original jail only contained 48 beds. In 1996, 47 general housing beds and eight segregation beds were added. In 2002, the current main jail was opened under the tenure of Sheriff Clay N. Whittle, the 14<sup>th</sup> Sheriff of the County since its establishment in 1790. The current inmate capacity for the jail is 266 which includes 25 segregation cells. Female inmates are currently housed in the C & D pods. In March 2010, construction was started for a new housing unit.

The Detention Facility is divided into two divisions; an operations division and an administrative division. Both divisions are under the command of the Bureau of Detention and Court Services.

The facility houses pre-trial inmates and post trial inmates who have been convicted of misdemeanors. Inmates convicted of felonies are transferred to a state prison.

The Columbia County Sheriff's Office is accredited by the Commission on Accreditation Law Enforcement Agency and the Sheriff's Office Communication Center.

**D. Pre-Audit Meeting**

The team met on May 3, 2010, in Evan, Georgia, to discuss the information provided by the Association staff and the officials from the Columbia County Detention Center.

The chairperson divided standards into the following groups:

Standards # 4-ALDF-1A-01 to #4-ALDF-3A-02 to Alfred Wood (Member)  
Standards # 4-ALDF-4A-01 to #4-ALDF-4D-28 to Kaye Harris (Chairperson)  
Standards # 4-ALDF-5A-01 to #4-ALDF-7G-01 to Sandra Guajardo (Member)

**E. The Audit Process**

1. Transportation

The team was escorted to the facility by Administrative Lt. Harvey Woods on May 4, 2010 at 7:45 AM.

2. Entrance Interview

The audit team proceeded to the conference room. The team expressed the appreciation of the Association for the opportunity to be involved with the Columbia County Detention Center in the accreditation process.

Administrative Lt. Harvey Woods escorted the team to the conference room where the formal entry meeting was held.

The following persons were in attendance:

Major John Wheeler, Detention and Court Services Bureau  
Captain Brett Carani, Operations Captain  
Lt. Harvey Woods, Operations Lieutenant  
SSgt. Teresa Reynolds, Accreditation Manager, Detention Center  
Lt. Pam Goddard, Accreditation Manager, Sheriff's Office  
Laura Busbin, LPN, Regional Administration  
Alicia Martin, LPN, Medical Team Administrator  
Betty Dawes, RN, Regional Director, Kentucky  
Jackie Richards, LPN, Regional Director  
Lisa Watts, RN, SR Vice-President of Operations of Southern Health Partners

The auditors introduced themselves and shared their background and experience. It was explained that the goal of the visiting team was to be as helpful and non-intrusive as possible during the conduct of the audit. The chairperson emphasized the goals of accreditation toward the efficiency and effectiveness of correctional systems throughout the United States. The audit schedule was also discussed at this time.

3. Facility Tour

The team toured the entire facility from 8:45 AM to 12:30 PM. The following persons accompanied the team on the tour and responded to the team's questions concerning facility operations:

Lt. Harvey Woods  
S. Sgt Teresa Reynolds  
Lt. Pam Goddard

4. Conditions of Confinement/Quality of Life

During the tour, the team evaluated the conditions of confinement at the facility. The following narrative description of the relevant programmatic services and functional areas summarizes the findings regarding the quality of life.

Security

The facility is surrounded by a razor wire perimeter fence. There is a mobile perimeter patrol 24 hours a day. The facility conducts four inmate counts daily. All staff and visitors enter through the main entrance of the facility. There is a Central Control Center which contains five monitors and approximately 73 cameras located throughout the facility. The Central Control Center maintains and distributes keys and equipment to staff. There is an excellent key control program. Suggestions were offered during the audit regarding tool/inventory controls. Security staff supervises inmate movement within the facility.

Environmental Conditions

Smoking is prohibited inside the facility. However, smoking is allowed in the attached housing units of the enclosed outdoor recreation areas. A door leads directly from the housing units to these recreation areas. Based on the definition of a facility (ALDF, 4<sup>th</sup> Edition), Standard # 4-ALDF-1A-21 was found to be in non-compliance. Noise levels, lighting and temperatures were satisfactory during the audit. However, Standard # 4-ALDF-1A-16 was found to be non-compliant; windows provided only 2.63 square feet of natural light.

Sanitation

The staff supervises the inmate workers in the detail of sanitation for the facility. The facility was found to be exceptionally clean, well-organized and maintained. There are weekly and monthly sanitation inspections conducted by staff.

Fire Safety

There are weekly (staff) and monthly (fire department) inspections conducted at the facility. Fire drills are conducted at least quarterly. All exit signs are clearly visible/lighted with evacuation routes posted.

## Food Service

The facility has a large kitchen which prepares all meals. The meals are then delivered to the individual housing units. Temperatures are checked and recorded. All kitchen areas are clean and well-maintained. Suggestions were offered during the audit regarding tool control. Cooler/freezer/dry storage areas met established temperature standards. Therapeutic diets are available as prescribed. The facility has a contract with the Meals on Wheels Program and prepares approximately 160 meals a day for distribution.

## Medical Care

The Columbia County Detention Center contracts with Southern Health Partners, based in Chattanooga, Tennessee for health services. There is a large medical unit which contains three cells. Two have negative pressure ventilation systems. The unit was clean and well organized. There is adequate equipment and supplies including two automatic external defibrillators. Pharmaceuticals are obtained from Gayco Pharmacy in Dublin, Georgia. Medications are dispensed in the housing units three times daily. A random count of medications/sharps/tools indicated accurate inventories. Suggestions were offered during the audit regarding inventory controls.

Services provided include intake assessments, physical examinations, emergency, chronic care, sick call, laboratory (draws only), radiology, OB/GYN and health education. Emergency and/or hospital services are generally provided by Prompt Care/Columbia County Hospital. Outside consultations are provided locally. Infirmary services are not provided; 24 hour nursing care is not currently provided.

Staffing is provided 12 hours daily from 8:00 AM – 8:00 PM seven days a week. The staff includes a medical team administrator, three licensed practical nurses, one registered nurse (12 hours/week), a physician once weekly and a physician assistant twice weekly.

Sick call is conducted daily. There is a five dollar co-payment for services.

The facility has been accredited by NCCHC since 2007.

Dental services are provided locally. Previously, a mobile dental unit provided services.

Mental health services are provided by a psychiatric registered nurse once weekly. All psychotropic medications are prescribed by the physician at the facility. Approximately 30 inmates were on prescribed psychotropic medications at the time of the audit. It was reported that suicidal inmates are placed in special cells,

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under observation, pending a mental health assessment and/or transfer to an appropriate facility. Weekly rounds are conducted in the Segregation Unit.

#### Recreation

Each housing unit, including the Segregation Unit, has an attached enclosed outdoor recreation area. All units have an inside day room with television and library books. The inmates housed in the Segregation Unit are allowed one-two hours a day of outside recreation seven days a week. Suggestions were offered during the audit on expansion of recreational activities for the inmates.

#### Religious Programming

The facility has a voluntary chaplain. All religious activities are conducted in multi-purpose rooms at the facility. Community volunteers visit the facility weekly and conduct Bible studies and other activities.

#### Offender Work Programs

Work programs at the facility include jobs in the laundry, food services, facility maintenance and community work squads.

#### Academic and Vocational Education

There are no academic or vocational programs offered at the facility.

#### Social Services

Staff members are available to assist inmates, as well as the volunteer chaplain. Volunteers (AA) visit the facility weekly. The facility works cooperatively with the Columbia County Drug Court which offers treatment and education programs.

#### Visitation

Visitation visits are offered six days a week and are conducted in visitation rooms adjacent to the housing units. All visits are non-contact. Two visitors at a time are generally allowed.

#### Library Services

Each housing unit has a small amount of reading materials available to the inmates. It was reported that the books are rotated on a regular basis.

Laundry

Each inmate has the opportunity to have laundry services twice weekly. Each inmate is issued three sets of clothing.

**F. Examination of Records**

Following the facility tour, the team proceeded to the conference room to review the accreditation files and evaluate compliance levels of the policies and procedures. The facility has no notices of non-compliance with local, state, or federal laws or regulations.

1. Litigation

Over the last three years, the facility had no consent decrees, class action lawsuits or adverse judgments.

2. Significant Incidents/Outcome Measures

The Significant Incident Summary and the ALDF Outcome Measures were reviewed during the audit. The data reported on the SIS indicated low numbers for each category; the reported numbers are considered reasonable based on inmate demographics. The data reported on the Outcome Measures also appeared reasonable for the reporting period. There had been one death at the facility during the past three years; the death was attributed to natural causes.

3. Departmental Visits

Team members visited/revisited the following departments to review conditions relating to departmental policy and operations:

<u>Department Visited</u>	<u>Person(s) Contacted</u>
Administration	Shirley Whitaker, Administrative Clerk Nicole Nelson, Administrative Assistant Debbie Pearson, Administrative Coordinator
Detention Center	Deputy Chuck Wells, Detention Officer (Central Control) Deputy Michael Plemmons, Detention Officer (Booking Control) SSgt. April March, A-Shift Supervisor (Booking & Intake) SSgt. Jennifer Douglas, Classification Deputy Andrea Hall, Detention Officer (APod) Laura Busbin, LPN, Regional Administration (Medical)

Deputy Christopher Slater, Deputy Sheriff (BPod)  
Deputy Efrain Montanez, Detention Officer (BPod)  
Deputy Eddie Gilbert, Detention Officer (Dorm)  
Deputy Dianne Cullinan, Detention Officer (CPod)  
Sgt. Alvin Slade, Kitchen Supervisor  
Deputy Christopher McDuffy, Maintenance Deputy

C-Shift/Muster Room  
Deputy Benjamin Fowler, Detention Officer  
Deputy Daniel Beasley, Detention Officer  
Deputy Dustin Johnson, Detention Officer  
Deputy Hunter Parrack, Detention Officer  
Deputy Jonathon McGahee, Detention Officer  
Deputy Rajeev Kondur, Detention Officer  
Deputy Travis Smith, Detention Officer  
Deputy Elizabeth Spurgeon, Detention Officer  
Deputy Maria Hurlburt, Detention Officer

4. Shifts

a. Day Shift (6:00 a.m. – 6:00 p.m.)

The team was present at the facility during the day shift every day of the audit. The team found the staff to be professional, courteous and knowledgeable. Tours were conducted and different departments/housing units visited.

b. Night Shift (6:00 p.m. – 6:00 a.m.)

The team was present at the facility during this shift. The change of shift roll call was attended and the team talked to both staff and inmates. Comments from the staff were very positive. All staff were knowledgeable of their duties.

5. Status of Previously Non-compliant Standards/Plans of Action

The team reviewed the status of standards previously found non-compliant, for which a waiver was not granted, and found the following:

Standard # 4-ALDF-2A-54 - The standard remains in non-compliance. A Plan of Action had been previously required.

Standard # 4-ALDF-4D-06 – Compliance

Standard # 4-ALDF-5A-04 – Compliance

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Standard # 4-ALDF-5A-09 – The standard remains in non-compliance. A Plan of Action had been previously required.

Standard # 4-ALDF-6B-06 – This standard was found to be non-applicable during the audit.

**G. Interviews**

During the course of the audit, team members met with both staff and offenders to verify observations and/or to clarify questions concerning facility operations.

1. Offender Interviews

Approximately 50 inmates were interviewed. There were few inmate complaints. The majority of the inmates were happy to be housed at this facility. The main inmate complaint was that of boredom. All felt that additional recreational activities would be beneficial.

2. Staff Interviews

During the course of the audit, the team had the opportunity to speak with approximately 35 staff members. All spoke highly of the administrative staff and all felt safe at the facility.

**H. Exit Discussion**

The exit interview was held at 11:45 AM in the conference room with approximately 10 staff in attendance.

The chairperson explained the procedures that would follow the audit. The team discussed the compliance levels of the mandatory and non-mandatory standards and reviewed their individual findings with the group.

The chairperson expressed appreciation for the cooperation of everyone concerned and congratulated the facility team for the progress made and encouraged them to continue to strive toward even further professionalism within the correctional field.

COMMISSION ON ACCREDITATION FOR CORRECTIONS  
AND THE  
AMERICAN CORRECTIONAL ASSOCIATION

<b>COMPLIANCE TALLY</b>
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<b>Manual Type</b>	Adult Local Detention Facilities, 4 <sup>th</sup> Edition	
<b>Supplement</b>	2008 Standards Supplement	
<b>Facility/Program</b>	Columbia County Detention Center, Columbia County Sheriff's Office	
<b>Audit Dates</b>	May 4-6, 2010	
<b>Auditor(s)</b>	Kaye Harris, R.N., B.S., Chairperson	
	Alfred Wood, Member	
	Sandra Guajardo, Member	
	<b>MANDATORY</b>	<b>NON-MANDATORY</b>
Number of Standards in Manual	60	322
Number Not Applicable	1	30
Number Applicable	59	292
Number Non-Compliance	0	9
Number in Compliance	59	283
Percentage (%) of Compliance	100%	97%
<ul style="list-style-type: none"> <li>● Number of Standards <i>minus</i> Number of Not Applicable <i>equals</i> Number Applicable</li> <li>● Number Applicable <i>minus</i> Number Non-Compliance <i>equals</i> Number Compliance</li> <li>● Number Compliance <i>divided by</i> Number Applicable <i>equals</i> Percentage of Compliance</li> </ul>		

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Columbia County Sheriff's Office  
Columbia County Detention Center  
Appling, Georgia

May 4-6, 2010

Visiting Committee Findings

Non-Mandatory Standards

Non-Compliance

**Standard #4-ALDF-1A-16 Revised August 2006.**

ALL INMATE ROOMS/CELLS PROVIDE THE OCCUPANTS WITH ACCESS TO NATURAL LIGHT BY MEANS OF AT LEAST THREE SQUARE FEET OF TRANSPARENT GLAZING, PLUS TWO ADDITIONAL SQUARE FEET OF TRANSPARENT GLAZING PER INMATE IN ROOMS/CELLS WITH THREE OR MORE INMATES. (RENOVATION, ADDITION, NEW CONSTRUCTION ONLY)

FINDINGS:

The windows only allow 2.63 square feet of natural light. A waiver was granted for the previous audit.

AGENCY RESPONSE

Waiver Request

Cells have windows that measure less than 3 square feet. Cell windows cannot be enlarged. Request waiver for existing structure that was completed before the first audit.

AUDITOR'S RESPONSE

The audit team supports the request for a waiver on this standard.

**Standard #4-ALDF-1A-21**

SMOKING IS NOT ALLOWED IN THE FACILITY.

FINDINGS:

Smoking is prohibited inside the facility. Smoking is allowed in the enclosed outside recreation areas which are adjacent and accessed through a door in the housing units. Based on the definition of a facility, this standard was found to be non-compliant.

AGENCY RESPONSE

Appeal of the Visiting Committee Finding

This facility does not allow inmates to smoke "in" the facility. We take this to mean an indoor environment. The inmates are allowed to smoke in a recreation yard which is an open air outdoor environment.

AUDITOR'S RESPONSE

The audit team does not support an appeal for this standard based on the definition of a facility. The definition of a facility states a "set of buildings or area, whether or not enclosing a building or set of buildings". Inmates are allowed to smoke in the enclosed outdoor recreation areas which are directly accessed through the housing units. This standard needs additional clarification if smoking is allowed in these outdoor attached areas. The standard needs to reflect "inside" the facility.

**Standard #4-ALDF-2A-14**

A COMPREHENSIVE STAFFING ANALYSIS IS CONDUCTED ANNUALLY. THE STAFFING ANALYSIS IS USED TO DETERMINE STAFFING NEEDS AND PLANS. RELIEF FACTORS ARE CALCULATED FOR EACH CLASSIFICATION OF STAFF THAT IS ASSIGNED TO RELIEVED POSTS OR POSITIONS. ESSENTIAL POSTS AND POSITIONS, AS DETERMINED IN THE STAFFING PLAN, ARE CONSISTENTLY FILLED WITH QUALIFIED PERSONNEL.

FINDINGS:

A staffing analysis was not available. A workload assessment was provided; however, this assessment was incomplete and did not provide any comprehensive analysis.

AGENCY RESPONSE

Plan of Action

Staffing analysis of the Detention Center will be completed annually utilizing the standardized "Staffing Analysis Workbook for Jails" distributed by the National Institute of Corrections as suggested by the auditors.

Task

- a. Complete staffing analysis annually

Responsible Agency

- a. Columbia County Detention Center

Assigned Staff

- a. CPT Brett Carani

Anticipated Completion Date

- a. 07-16-2010 then annually

AUDITOR'S RESPONSE

The visiting team supports this Plan of Action.

**Standard #4-ALDF 2A-54 Revised August 2007.**

STAFF ASSIGNED TO WORK DIRECTLY WITH INMATES IN SPECIAL MANAGEMENT UNITS ARE SELECTED BASED ON CRITERIA THAT INCLUDES:

- COMPLETION OF PROBATIONARY PERIOD
- EXPERIENCE
- SUITABILITY FOR THIS POPULATION

STAFF ARE CLOSELY SUPERVISED AND THEIR PERFORMANCE IS DOCUMENTED AT LEAST ANNUALLY. THERE ARE PROVISIONS FOR ROTATION TO OTHER DUTIES.

FINDINGS:

All staff are routinely rotated to special management units. This standard was found to be in non-compliance during the previous audit and a Plan of Action was required.

AGENCY RESPONSE

Discretionary Compliance Request

A preference to satisfy the standard/expected practice's intent in an alternative fashion.

The Columbia County Detention Center requires that all shift employees rotate in all posts which include the Administrative/Disciplinary Segregation housing unit. The area

which includes this housing unit has three staff members assigned at all times. The staff member that is still on probation when assigned to this unit is not alone and has experienced staff members overseeing their work. Probationary employees are evaluated through the Field Training program quarterly and all employees are evaluated annually by the parent organization and county policies.

#### AUDITOR'S RESPONSE

The visiting team does not support the discretionary compliance request. The standard was found to be in non-compliance in 2007 and a Plan of Action was requested.

#### **Standard #4-ALDF-4D-09**

FIRST AID KITS ARE AVAILABLE IN DESIGNATED AREAS OF THE FACILITY AS DETERMINED BY THE DESIGNATED HEALTH AUTHORITY IN CONJUNCTION WITH THE FACILITY ADMINISTRATOR. THE HEALTH AUTHORITY APPROVES THE CONTENTS, NUMBER, LOCATION, AND PROCEDURES FOR MONTHLY INSPECTION OF THE KIT(S) AND WRITTEN PROTOCOLS FOR USE BY NON-MEDICAL STAFF. AN AUTOMATIC EXTERNAL DEFIBRILLATOR IS AVAILABLE FOR USE AT THE FACILITY.

#### FINDINGS:

A random inspection of the first aid kits was conducted. Kits were not sealed, contents not listed and all had expired contents in the kits. Facility policy requires sealing of the kits and monthly inspections. Documentation present for review indicated monthly inspections; however, this documentation was incorrect.

#### AGENCY RESPONSE

The standard is addressed in policy but was not being followed. Proper personnel will be counseled and retrained so that the standard is met and policy is followed.

#### Task

- a. Retrain personnel in proper procedures
- b. Follow-up with supervisory spot checks to ensure compliance

#### Responsible Agency

- a. Southern Health Partners (contracted health authority)
- b. Columbia County Detention Center

#### Assigned Staff

- a. Alicia Martin, LPN
- b. CPT Brett Carani

Anticipated Completion Date

- a. 05-14-2010
- b. Ongoing

AUDITOR'S RESPONSE

The visiting team supports the Plan of Action. Immediate steps were taken during the audit for corrective actions needed.

**Standard #4-ALDF 4D-20 Revised January 2005.**

DUE PROCESS IS ENSURED PRIOR TO A TRANSFER THAT RESULTS IN AN INMATE'S PLACEMENT IN A NON-CORRECTIONAL FACILITY OR IN A SPECIAL UNIT WITHIN THE FACILITY OR AGENCY, SPECIFICALLY DESIGNATED FOR THE CARE AND TREATMENT OF THE SEVERELY MENTALLY ILL OR DEVELOPMENTALLY DISABLED. PROCEDURES FOR TRANSFER COMPLY WITH FEDERAL, STATE, AND LOCAL LAW. IN EMERGENCY SITUATIONS, A HEARING IS HELD AS SOON AS POSSIBLE AFTER THE TRANSFER.

FINDINGS:

The facility does not follow due process procedures based on Georgia state laws. A waiver was granted for the previous audit.

AGENCY RESPONSE

Plan of Action

Staffing analysis of the Detention Center will be completed annually utilizing the standardized "Staffing Analysis Workbook for Jails" distributed by the National Institute of Corrections as suggested by the auditors.

Task

- a. Complete staffing analysis annually

Responsible Agency

- a. Columbia County Detention Center

Assigned Staff

- 
- a. CPT Brett Carani

Anticipated Completion Date

- a. 07-16-2010 then annually

AUDITOR'S RESPONSE

The visiting team supports a waiver request for this standard based on Georgia law. The Plan of Action listed above was not applicable to this standard. A waiver was requested.

**Standard #4-ALDF-4D-22-1**

DETAINEES ARE SCREENED WITHIN 24 HOURS OF ARRIVAL AT THE FACILITY FOR POTENTIAL VULNERABILITIES OR TENDENCIES OF ACTING OUT WITH SEXUALLY AGGRESSIVE BEHAVIOR. HOUSING ASSIGNMENTS ARE MADE ACCORDINGLY.

FINDINGS:

The initial screening/intake form does not address potential vulnerabilities/sexually aggressive behavior. Facility policy states that inmates are classified within eight hours of arrival and includes the above screenings. However, the classification report does not specifically address these issues.

AGENCY RESPONSE

Plan of Action

Intake screening forms and questions being asked that are prompted by computer during the booking process will include questions that would bring sexual assault information to the staff's attention upon arrival at the facility.

Task

- a. Add questions to the Receiving Screening form
- b. Add questions to the computer generated form.

Responsible Agency

- a. Columbia County Detention Center

Assigned Staff

- a. LT Harvey Woods
- b. CPT Brett Carani

Anticipated Completion Date

- a. Completed 05-04-2010

AUDITOR'S RESPONSE

The visiting team supports the Plan of Action for this standard. Immediate steps were taken during the audit to correct this issue.

**Standard #4-ALDF-5A-09**

INMATES HAVE ACCESS TO EDUCATIONAL PROGRAMS AND, WHEN AVAILABLE, TO VOCATIONAL COUNSELING AND VOCATIONAL TRAINING. EDUCATIONAL AND VOCATIONAL PROGRAMS ADDRESS THE NEEDS OF THE INMATE POPULATION.

FINDINGS:

The facility does not offer any educational and/or vocational programs. This standard was found to be in non-compliance during the previous audit and a Plan of Action was required.

AGENCY RESPONSE

Discretionary Compliance Request

An objection from a parent agency, higher level government official, or funding source to the nature of the standard/expected practice.

Funding of an education program was requested and denied. With the current economic climate the facility's budget would not be raised to fund this program and has actually been reduced.

NOTE: The facility rules do allow GED books to be sent in by friends or relatives to individual inmates. Additionally, local churches, civic organizations and book stores donate GED study guides for inmates use.

AUDITOR'S RESPONSE

The visiting team does not support discretionary compliance for this standard. A Plan of Action was requested on this standard in 2007. The visiting team feels a Plan of Action should be submitted.

**Standard #4-ALDF-5C-10**

THE INMATE WORKDAY APPROXIMATES THE WORKDAY IN THE

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COMMUNITY. INMATE PERFORMANCE IS REGULARLY EVALUATED AND RECORDED. INMATES RECEIVE WRITTEN RECOGNITION OF COMPETENCIES THAT THEY ACQUIRE.

FINDINGS:

The inmate work day does not approximate a work day in the community. Inmates do not receive any evaluations or written recognition of any competencies they acquire.

AGENCY RESPONSE

Discretionary Compliance Request

An objection from a parent agency, higher level government official, or funding source to the nature of the standard/expected practice.

The parent agency of the Detention Center is not willing to create another property right for inmates confined in this jurisdiction. This does not affect life, health or safety of inmates or staff.

AUDITOR'S RESPONSE

The audit team does not support discretionary compliance for this standard. Even though jobs are limited at the facility, offenders can be recognized by certificates, etc. A Plan of Action should be submitted.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Columbia County Sheriff's Office  
Columbia County Detention Center  
Appling, Georgia

May 4-6, 2010

Visiting Committee Findings

Mandatory Standards

Not Applicable

**Standard #4-ALDF-4C-23 (MANDATORY)**

ALL INTRA-SYSTEM TRANSFER INMATES RECEIVE A HEALTH SCREENING BY HEALTH-TRAINED OR QUALIFIED HEALTH CARE PERSONNEL, WHICH COMMENCES ON THEIR ARRIVAL AT THE FACILITY. ALL FINDINGS ARE RECORDED ON A SCREENING FORM APPROVED BY THE HEALTH AUTHORITY. AT A MINIMUM, THE SCREENING INCLUDES THE FOLLOWING:

INQUIRY INTO:

- WHETHER THE INMATE IS BEING TREATED FOR A MEDICAL OR DENTAL PROBLEM
- WHETHER THE INMATE IS PRESENTLY ON MEDICATION
- WHETHER THE INMATE HAS A CURRENT MEDICAL OR DENTAL COMPLAINT

OBSERVATION OF:

- GENERAL APPEARANCE AND BEHAVIOR
- PHYSICAL DEFORMITIES
- EVIDENCE OF ABUSE OR TRAUMA

MEDICAL DISPOSITION OF INMATES:

- CLEARED FOR GENERAL POPULATION
- CLEARED FOR GENERAL POPULATION WITH APPROPRIATE REFERRAL TO HEALTH CARE SERVICE
- REFERRAL TO APPROPRIATE HEALTH CARE SERVICE FOR SERVICE FOR EMERGENCY TREATMENT

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FINDINGS:

The facility does not have any intra-system offender transfers.

COMMISSION ON ACCREDITATION FOR CORRECTIONS

Columbia County Sheriff's Office  
Columbia County Detention Center  
Appling, Georgia

May 4-6, 2010

Visiting Committee Findings

Non-Mandatory Standards

Not Applicable

**Standard #4-ALDF-2A-36**

INMATES PARTICIPATING IN WORK OR EDUCATIONAL RELEASE PROGRAMS ARE SEPARATED FROM INMATES IN THE GENERAL POPULATION.

FINDINGS:

The facility does not have any work/educational release programs.

**Standard #4-ALDF-2A-38**

IF YOUTHFUL OFFENDERS ARE HOUSED IN THE FACILITY, THEY ARE HOUSED IN A SPECIALIZED UNIT FOR YOUTHFUL OFFENDERS EXCEPT WHEN:

- VIOLENT, PREDATORY YOUTHFUL OFFENDER POSES AN UNDUE RISK OF HARM TO OTHERS WITHIN THE SPECIALIZED UNIT, OR
- A QUALIFIED MEDICAL OR MENTAL-HEALTH SPECIALIST DOCUMENTS THAT THE YOUTHFUL OFFENDER WOULD BENEFIT FROM PLACEMENT OUTSIDE THE UNIT

A WRITTEN STATEMENT IS PREPARED DESCRIBING THE SPECIFIC REASONS FOR HOUSING A YOUTHFUL OFFENDER OUTSIDE THE SPECIALIZED UNIT AND A CASE-MANAGEMENT PLAN SPECIFYING WHAT BEHAVIORS NEED TO BE MODIFIED AND HOW THE YOUTHFUL OFFENDER MAY RETURN TO THE UNIT. THE STATEMENT OF REASONS AND CASE-MANAGEMENT PLAN MUST BE APPROVED BY THE FACILITY ADMINISTRATOR OR HIS/HER DESIGNEE. CASES ARE REVIEWED AT LEAST QUARTERLY BY THE CASE

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MANAGER, THE ADMINISTRATOR OR HIS OR HER DESIGNEE, AND THE YOUTHFUL OFFENDER TO DETERMINE WHETHER A YOUTHFUL OFFENDER SHOULD BE RETURNED TO THE SPECIALIZED UNIT.

FINDINGS:

The facility does not house youthful offenders.

**Standard #4-ALDF-2A-39**

DIRECT SUPERVISION IS EMPLOYED IN THE SPECIALIZED UNIT TO ENSURE THE SAFETY AND SECURITY OF YOUTHFUL OFFENDERS.

FINDINGS:

The facility does not house youthful offenders.

**Standard #4-ALDF-2A-40**

CLASSIFICATION PLANS FOR YOUTHFUL OFFENDERS DETERMINE LEVEL OF RISK AND PROGRAM NEEDS DEVELOPMENTALLY APPROPRIATE FOR ADOLESCENTS. CLASSIFICATION PLANS INCLUDE CONSIDERATION OF PHYSICAL, MENTAL, SOCIAL, AND EDUCATIONAL MATURITY OF THE YOUTHFUL OFFENDER.

FINDINGS:

The facility does not house youthful offenders.

**Standard #4-ALDF-2A-41**

ADEQUATE PROGRAM SPACE IS PROVIDED TO MEET THE PHYSICAL, SOCIAL, AND EMOTIONAL NEEDS OF YOUTHFUL OFFENDERS AND ALLOWS FOR THEIR PERSONAL INTERACTIONS AND GROUP ORIENTED ACTIVITIES.

FINDINGS:

The facility does not house youthful offenders.

**Standard #4-ALDF-2A-42**

YOUTHFUL OFFENDERS IN THE SPECIALIZED UNIT FOR YOUTHFUL INMATES HAVE NO MORE THAN INCIDENTAL SIGHT OR SOUND CONTACT WITH ADULT INMATES FROM OUTSIDE THE UNIT IN LIVING, PROGRAM, DINING, OR OTHER COMMON AREAS OF THE FACILITY. ANY OTHER SIGHT OR SOUND CONTACT IS MINIMIZED, BRIEF, AND IN CONFORMANCE WITH

APPLICABLE LEGAL REQUIREMENTS.

FINDINGS:

The facility does not house youthful offenders.

**Standard #4-ALDF-2A-43**

PROGRAM PERSONNEL WHO WORK WITH YOUTHFUL OFFENDERS ARE TRAINED IN THE DEVELOPMENTAL, SAFETY, AND OTHER SPECIFIC NEEDS OF YOUTHFUL OFFENDERS. WRITTEN JOB DESCRIPTIONS AND QUALIFICATIONS REQUIRE TRAINING FOR STAFF WHO ARE RESPONSIBLE FOR PROGRAMMING OF YOUTHFUL OFFENDERS IN THE SPECIALIZED UNIT BEFORE BEING ASSIGNED TO WORK WITH YOUTHFUL OFFENDERS. TRAINING INCLUDES, BUT IS NOT LIMITED TO THE FOLLOWING AREAS:

- ADOLESCENT DEVELOPMENT
- EDUCATIONAL PROGRAMMING
- CULTURAL AWARENESS
- CRISIS PREVENTION AND INTERVENTION
- LEGAL ISSUES
- HOUSING AND PHYSICAL PLANT
- POLICIES AND PROCEDURES
- MANAGEMENT OF, AND PROGRAMMING FOR, SEX OFFENDERS
- SUBSTANCE-ABUSE SERVICES
- COGNITIVE BEHAVIORAL INTERVENTIONS, INCLUDING ANGER MANAGEMENT, SOCIAL-SKILLS TRAINING, PROBLEM SOLVING
- RESISTING PEER PRESSURE
- SUICIDE PREVENTION
- NUTRITION
- MENTAL-HEALTH ISSUES
- GENDER-SPECIFIC ISSUES
- CASE-MANAGEMENT PLANNING AND IMPLEMENTATION

FINDINGS:

The facility does not house youthful offenders.

**Standard #4-ALDF-2C-02**

WHEN A CANINE UNIT IS OPERATED BY THE FACILITY:

- THERE IS A MISSION STATEMENT, INCLUDING GOALS AND OBJECTIVES
- THE CIRCUMSTANCES IN WHICH CANINE UNITS MAY BE USED

- ARE CLEARLY DEFINED
- EMERGENCY PLANS ARE INTEGRATED INTO THE OVERALL EMERGENCY PLANS OF THE FACILITY
- THERE ARE CRITERIA FOR SELECTING, TRAINING AND CARING FOR ANIMALS
- THERE ARE CRITERIA FOR THE SELECTION, TRAINING, AND PHYSICAL FITNESS OF HANDLERS
- THERE IS AN APPROVED SANITATION PLAN THAT COVERS INSPECTION, HOUSING, TRANSPORTATION AND DAILY GROOMING FOR THE ANIMALS
- THERE ARE DAILY AND CURRENT RECORDS ON TRAINING, CARE OF DOGS AND SIGNIFICANT EVENTS.

FINDINGS:

The facility does not have a canine unit.

**Standard #4-ALDF-4A-14**

WHEN REQUIRED BY STATUTE, FOOD PRODUCTS THAT ARE GROWN OR PRODUCED WITHIN THE SYSTEM ARE INSPECTED AND APPROVED BY THE APPROPRIATE GOVERNMENT AGENCY; THERE IS A DISTRIBUTION SYSTEM THAT ENSURES PROMPT DELIVERY OF FOODSTUFFS TO FACILITY KITCHENS.

FINDINGS:

The facility does not grow/produce any food products.

**Standard #4-ALDF-4C-09**

IF INFIRMARY CARE IS PROVIDED ONSITE, IT INCLUDES, AT A MINIMUM, THE FOLLOWING:

- DEFINITION OF THE SCOPE OF INFIRMARY CARE SERVICES AVAILABLE
- A PHYSICIAN ON CALL OR AVAILABLE 24 HOURS PER DAY
- HEALTH CARE PERSONNEL HAVE ACCESS TO A PHYSICIAN OR A REGISTERED NURSE AND ARE ON DUTY 24 HOURS PER DAY WHEN PATIENTS ARE PRESENT
- ALL INMATES/PATIENTS ARE WITHIN SIGHT OR SOUND OF A STAFF MEMBER
- AN INFIRMARY CARE MANUAL THAT INCLUDES NURSING CARE PROCEDURES
- AN INFIRMARY RECORD THAT IS A SEPARATE AND DISTINCT SECTION OF THE COMPLETE MEDICAL RECORD

- COMPLIANCE WITH APPLICABLE STATE STATUTES AND LOCAL LICENSING REQUIREMENTS

FINDINGS:

The facility does not have 24 hour nursing coverage, therefore infirmary services are not offered.

**Standard #4-ALDF-4C-10**

INMATES IN THE MEDICAL HOUSING UNIT OR INFIRMARY AREA HAVE ACCESS TO OPERABLE WASHBASINS WITH HOT AND COLD RUNNING WATER AT A MINIMUM RATIO OF ONE BASIN FOR EVERY 12 OCCUPANTS, UNLESS STATE OR LOCAL BUILDING OR HEALTH CODES SPECIFY A DIFFERENT RATIO.

FINDINGS:

The facility does not have 24 hour nursing coverage, therefore infirmary services are not offered.

**Standard #4-ALDF-4C-11**

SUFFICIENT BATHING FACILITIES ARE PROVIDED IN THE MEDICAL HOUSING UNIT OR INFIRMARY AREA TO ALLOW INMATES TO BATHE DAILY. AT LEAST ONE BATHING FACILITY IS CONFIGURED AND EQUIPPED TO ACCOMMODATE INMATES WHO HAVE PHYSICAL IMPAIRMENTS OR WHO NEED ASSISTANCE TO BATHE. WATER FOR BATHING IS THERMOSTATICALLY CONTROLLED TO TEMPERATURES RANGING FROM 100 DEGREES FAHRENHEIT TO 120 DEGREES FAHRENHEIT.

FINDINGS:

The facility does not have 24 hour nursing coverage, therefore infirmary services are not offered.

**Standard #4-ALDF-4C-12**

INMATES IN THE MEDICAL HOUSING UNIT OR INFIRMARY HAVE ACCESS TO TOILETS AND HAND-WASHING FACILITIES 24 HOURS PER DAY AND ARE ABLE TO USE TOILET FACILITIES WITHOUT STAFF ASSISTANCE. TOILETS ARE PROVIDED AT A MINIMUM RATIO OF ONE FOR EVERY 12 INMATES IN MALE FACILITIES AND ONE FOR EVERY EIGHT INMATES IN FEMALE FACILITIES. URINALS MAY BE SUBSTITUTED FOR UP TO ONE-HALF OF THE TOILETS IN MALE FACILITIES. ALL HOUSING UNITS WITH THREE OR MORE INMATES HAVE A MINIMUM OF TWO TOILETS. THESE RATIOS APPLY

UNLESS STATE OR LOCAL BUILDING OR HEALTH CODES SPECIFY A DIFFERENT RATIO.

FINDINGS:

The facility does not have 24 hour nursing coverage, therefore infirmary services are not offered.

**Standard #4-ALDF-4C-37**

INMATES HAVE ACCESS TO A CHEMICAL DEPENDENCY TREATMENT PROGRAM. WHEN A CHEMICAL DEPENDENCY PROGRAM EXISTS, THE CLINICAL MANAGEMENT OF CHEMICALLY DEPENDENT INMATES INCLUDES AT A MINIMUM THE FOLLOWING:

- A STANDARDIZED DIAGNOSTIC NEEDS ASSESSMENT ADMINISTERED TO DETERMINE THE EXTENT OF USE, ABUSE, DEPENDENCY, AND/OR CODEPENDENCY
- AN INDIVIDUALIZED TREATMENT PLAN DEVELOPED AND IMPLEMENTED BY A MULTIDISCIPLINARY CLINICAL TEAM THAT INCLUDES MEDICAL, MENTAL HEALTH, AND SUBSTANCE ABUSE PROFESSIONALS
- PRERELEASE RELAPSE-PREVENTION EDUCATION, INCLUDING RISK MANAGEMENT
- INMATE INVOLVEMENT IN AFTERCARE DISCHARGE PLANS

FINDINGS:

A chemical dependency treatment program is not offered at the facility.

**Standard #4-ALDF-4D-11**

UNLESS PROHIBITED BY STATE LAW, INMATES, UNDER STAFF SUPERVISION, MAY PERFORM FAMILIAL DUTIES COMMENSURATE WITH THEIR LEVEL OF TRAINING. THESE DUTIES MAY INCLUDE THE FOLLOWING:

- PEER SUPPORT AND EDUCATION
- HOSPICE ACTIVITIES
- ASSISTING IMPAIRED INMATES ON A ONE-ON-ONE BASIS WITH ACTIVITIES OF DAILY LIVING
- SERVING AS A SUICIDE COMPANION IF QUALIFIED AND TRAINED THROUGH A FORMAL PROGRAM THAT IS PART OF A SUICIDE PREVENTION PLAN

INMATES ARE NOT TO BE USED FOR THE FOLLOWING DUTIES:

- PERFORMING DIRECT PATIENT CARE SERVICES
- SCHEDULING HEALTH CARE APPOINTMENTS
- DETERMINING ACCESS OF OTHER INMATES TO HEALTH CARE SERVICES
- HANDLING OR HAVING ACCESS TO SURGICAL INSTRUMENTS, SYRINGES, NEEDLES, MEDICATIONS, OR HEALTH RECORDS
- OPERATING DIAGNOSTIC OR THERAPEUTIC EQUIPMENT EXCEPT UNDER DIRECT SUPERVISION, BY SPECIALLY TRAINED STAFF, IN A VOCATIONAL TRAINING PROGRAM

FINDINGS:

The facility does not utilize any inmates as assistants.

**Standard #4-ALDF-5A-05**

THERE IS A TREATMENT PHILOSOPHY WITHIN THE CONTEXT OF THE TOTAL CORRECTIONAL SYSTEM AS WELL AS GOALS AND MEASURABLE OBJECTIVES. THESE DOCUMENTS ARE REVIEWED AT LEAST ANNUALLY AND UPDATED AS NEEDED.

FINDINGS:

The facility does not have a therapeutic community.

**Standard #4-ALDF-5A-06**

THERE IS AN APPROPRIATE RANGE OF PRIMARY TREATMENT SERVICES FOR ALCOHOL AND OTHER SUBSTANCE-ABUSING INMATES THAT INCLUDE, AT A MINIMUM, THE FOLLOWING:

- INMATE DIAGNOSIS
- IDENTIFIED PROBLEM AREAS
- INDIVIDUAL TREATMENT OBJECTIVES
- TREATMENT GOALS
- COUNSELING NEEDS
- DRUG EDUCATION PLAN
- RELAPSE PREVENTION AND MANAGEMENT
- CULTURALLY SENSITIVE TREATMENT OBJECTIVES, AS APPROPRIATE
- THE PROVISION OF SELF-HELP GROUPS AS AN ADJUNCT TO TREATMENT
- PRERELEASE AND TRANSITIONAL SERVICE NEEDS
- COORDINATION EFFORTS WITH COMMUNITY SUPERVISION AND TREATMENT STAFF DURING THE PRERELEASE PHASE TO

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ENSURE A CONTINUUM OF SUPERVISION AND TREATMENT

FINDINGS:

The facility does not have a therapeutic community.

**Standard #4-ALDF-5A-07**

THE FACILITY USES A COORDINATED STAFF APPROACH TO DELIVER TREATMENT SERVICES. THIS APPROACH TO SERVICE DELIVERY IS DOCUMENTED IN TREATMENT PLANNING CONFERENCES AND IN INDIVIDUAL TREATMENT FILES.

FINDINGS:

The facility does not have a therapeutic community.

**Standard #4-ALDF-5A-08**

THERE ARE INCENTIVES FOR TARGETED TREATMENT PROGRAMS TO INCREASE AND MAINTAIN THE INMATE'S MOTIVATION FOR TREATMENT.

FINDINGS:

The facility does not have a therapeutic community.

**Standard #4-ALDF-5A-10**

IN FACILITIES OFFERING ACADEMIC AND VOCATIONAL TRAINING PROGRAMS, CLASSROOMS ARE DESIGNED IN CONSULTATION WITH SCHOOL AUTHORITIES. (RENOVATION, ADDITION, NEW CONSTRUCTION ONLY)

FINDINGS:

The facility does not offer academic/vocational programs.

**Standard #4-ALDF-5B-14**

WHEN THE FACILITY IS DESIGNATED TO OPERATE ANY TYPE OF PRETRIAL INTERVENTION SERVICE OR OTHER RELEASE PROGRAMS, ITS AUTHORITY AND RESPONSIBILITY ARE STATED BY STATUTE OR ADMINISTRATIVE REGULATION.

FINDINGS:

The facility does not operate any pretrial intervention/release programs.

**Standard #4-ALDF-5B-15**

WHEN A PRETRIAL INTERVENTION PROGRAM, DIVERSION PROGRAM, PRETRIAL RELEASE PROGRAM, OR SUPERVISED RELEASE PROGRAM IS CONDUCTED IN THE FACILITY, SUFFICIENT STAFF, SPACE, AND EQUIPMENT ARE PROVIDED TO SERVICE THE PROGRAM.

FINDINGS:

The facility does not operate any pretrial intervention/release programs.

**Standard #4-ALDF-5B-16**

WHERE TEMPORARY RELEASE PROGRAMS EXIST, THE PROGRAMS HAVE THE FOLLOWING ELEMENTS:

- WRITTEN OPERATIONAL PROCEDURES
- CAREFUL SCREENING AND SELECTION PROCEDURES
- WRITTEN RULES OF INMATE CONDUCT
- A SYSTEM FOR EVALUATING PROGRAM EFFECTIVENESS
- EFFORTS TO OBTAIN COMMUNITY COOPERATION AND SUPPORT

FINDINGS:

The facility does not have any temporary release programs.

**Standard #4-ALDF-5B-17**

WHERE WORK RELEASE AND/OR EDUCATIONAL RELEASE ARE AUTHORIZED, THE FACILITY ADMINISTRATOR HAS AUTHORITY TO APPROVE OR DISAPPROVE PARTICIPATION FOR EACH INMATE.

FINDINGS:

The facility does not authorize any work/educational release programs.

**Standard #4-ALDF-5C-13**

WHERE AN INDUSTRIES PROGRAM EXISTS, ITS ESTABLISHMENT IS AUTHORIZED AND AREAS OF AUTHORITY, RESPONSIBILITY, AND ACCOUNTABILITY ARE DELINEATED.

FINDINGS:

The facility does not have any industries programs.

**Standard #4-ALDF-5C-14**

THE NUMBER OF INMATES ASSIGNED TO INDUSTRIES OPERATIONS MEETS THE REALISTIC WORKLOAD NEEDS OF EACH OPERATING UNIT.

FINDINGS:

The facility does not have any industries programs.

**Standard #4-ALDF-5C-15**

THERE IS A COMPREHENSIVE QUALITY CONTROL PROCESS.

FINDINGS:

The facility does not have any industries programs.

**Standard #4-ALDF-5C-16**

A COST ACCOUNTING SYSTEM FOR EACH INDUSTRIES UNIT IS DESIGNED, IMPLEMENTED, AND MAINTAINED IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES.

FINDINGS:

The facility does not have any industries programs.

**Standard #4-ALDF-7B-12 Revised August 2007.**

WRITTEN POLICY, PROCEDURE AND PRACTICE PROVIDE THAT CORRECTIONAL OFFICERS ASSIGNED TO AN EMERGENCY UNIT HAVE AT LEAST ONE YEAR OF CORRECTIONS AND 40 HOURS OF SPECIALIZED TRAINING BEFORE UNDERTAKING THEIR ASSIGNMENTS. OTHER STAFF MUST HAVE AT LEAST ONE YEAR OF EXPERIENCE IN THEIR SPECIALTY WITHIN A CORRECTIONAL SETTING. THE SPECIALIZED TRAINING MAY BE PART OF THEIR FIRST YEAR TRAINING PROGRAM. OFFICERS AND STAFF ASSIGNED TO EMERGENCY UNITS RECEIVE 40 HOURS OF TRAINING ANNUALLY, AT LEAST 16 OF WHICH ARE SPECIFICALLY RELATED TO EMERGENCY UNIT ASSIGNMENT.

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FINDINGS:

The facility does not have an emergency unit.

**Standard #4-ALDF-7F-07**

IF VOLUNTEERS ARE USED IN THE DELIVERY OF HEALTH CARE, THERE IS A DOCUMENTED SYSTEM FOR SELECTION, TRAINING, STAFF SUPERVISION, FACILITY ORIENTATION, AND A DEFINITION OF TASKS, RESPONSIBILITIES AND AUTHORITY THAT IS APPROVED BY THE HEALTH AUTHORITY. VOLUNTEERS MAY ONLY PERFORM DUTIES CONSISTENT WITH THEIR CREDENTIALS AND TRAINING. VOLUNTEERS AGREE IN WRITING TO ABIDE BY ALL FACILITY POLICIES, INCLUDING THOSE RELATING TO THE SECURITY AND CONFIDENTIALITY OF INFORMATION.

FINDINGS:

Volunteers are not used in the delivery of health care.

### Significant Incident Summary

This summary is required to be provided to the chair of your audit team upon their arrival. The information contained on this form will also be summarized in the narrative portion of the visiting committee report and will be incorporated into the final report. It should contain data for the last 12 months; indicate those months in the boxes provided. Please type the data. If you have questions on how to complete the form, please contact your regional manager.  
 Facility: Columbia County Detention Center, Appling, GA Year: 2009/2010

Incidents		Months											
		Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb
Assault: Offenders/ Offenders*	Indicate types (sexual**, physical, etc.)	NA	Phys.	Phys.	Phys.	Phys.	NA	Phys.	Phys.	Sexual (1) Phys (2)	Phys.	Phys.	Phys.
	# With Weapon	0	0	0	0	0	0	0	0	0	0	0	0
	# Without Weapon	0	1	2	4	2	0	2	2	3	3	3	2
Assault: Offender/ Staff	Indicate types (sexual**, physical, etc.)	NA	NA	NA	Phys.	NA	Phys	Phys	NA	Phys	NA	NA	Phys
	# With Weapon	0	0	0	0	0	0	0	0	0	0	0	0
	# Without Weapon	0	0	0	1	0	1	1	0	1	0	0	1
Number of Forced Moves Used***	(Cell extraction or other forced relocation of offenders)	0	0	1	0	0	1	0	0	0	0	0	0
Disturbances****		0	0	0	0	0	0	0	0	0	0	0	0
Number of Times Chemical Agents Used		2	1	2	3	2	3	1	4	3	2	2	3
Number of Times Special Reaction Team Used		0	0	0	0	0	0	0	0	0	0	0	0
Four/Five Point Restraints	Number	1	0	1	0	0	0	1	0	1	0	2	1
	Indicate type (chair, bed, board, etc.)	Chair		Chair				Chair		Chair		Chair	Chair
Offender Medical Referrals as a Result of Injuries Sustained	#s should reflect incidents on this form, not rec or other source	3	2	4	5	3	3	3	5	6	5	4	5
Escapes	# Attempted	0	0	0	0	0	0	0	0	0	0	0	0
	# Actual	0	0	0	0	0	0	0	0	0	0	0	0
Substantiated Grievances (resolved in favor of offender)	Reason (medical, food, religious, etc.)#	C,L, SS,T, M	P,F,T C,SS	C,O, SS,M	C,PP	O,C	T	C,O,T M	C,O,M F,L	C	C,O	T,C,O	F,O, SS,T
	Number	8	7	7	2	7	1	4	6	1	2	7	6
Deaths	Reason (violent, illness, suicide, natural)	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
	Number	0	0	0	0	0	0	0	0	0	0	0	0

\*Any physical contact that involves two or more offenders  
 \*\*Oral, anal or vaginal copulation involving at least two parties  
 \*\*\*Routine transportation of offenders is not considered "forced"  
 \*\*\*\*Any incident that involves four or more offenders. Includes gang fights, organized multiple hunger strikes,  
 work stoppages, hostage situations, major fires, or other large scale incidents

#T=Treatment, F=Food,M=Medical, R=Religious,P=Privileges, PP=Policy/Procedures, L=Law/Rights, C=Conditions, SS=Safety/Sanitation, O=Other



Name of Facility Columbia County Detention Center  
 Number of Months Data Collected 12

Date March 09 thru Feb 10

<b>ALDF Outcome Measure Worksheet</b>				
<b>1A</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Calculated O.M</b>
		<b>The community, staff, contractors, volunteers, and inmates are protected from injury and illness caused by the physical environment.</b>		
	(1)	Number of worker compensation claims filed for injuries that resulted from the physical environment in the past 12 months.	5	
	divided by	Average number of Full-Time Equivalent (FTE) staff positions in the past 12 months.	120	.04
	(2)	Number of illnesses requiring medical attention as a result of the physical environment of the facility in the past 12 months.	0	
	divided by	Average daily population in the past 12 months.	247	0
	(3)	Number of illnesses requiring medical attention as a result of the physical environment of the facility in the past 12 months.	0	
	divided by	The number of admissions in the past 12 months.	4132	0
	(4)	Number of physical injuries or emotional trauma requiring treatment as a result of the physical environment of the facility in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(5)	Number of physical injuries or emotional trauma requiring treatment as a result of the physical environment of the facility in the past 12 months.	0	
	divided by	The number of admissions in the past 12 months.	4132	0
	(6)	Number of sanitation or health code violations identified by external agencies in the past 12 months.	8	
	divided by	The average daily population in the past 12 months.	247	.03
	(7)	Number of health code violations corrected in the past 12 months.	8	
	divided by	The number of health code violations identified in the past 12 months.	8	1
	(8)	Number of inmate grievances related to safety or sanitation found in favor of inmates in the past 12 months.	13	
	divided by	The number of inmate's grievances related to safety or sanitation in the past 12 months.	23	.56
	(9)	Number of fire code violations corrected in the past 12 months.	8	

	divided by	The number of fire code violations cited by jurisdictional authority in the past 12 months.	8	1
	(10)	Number of inmate injuries resulting from fires requiring medical treatment in a 12-month period.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(11)	Number of inmate injuries (other than by fire) requiring medical treatment in the past 12 months.	16	
	divided by	The average daily population of inmates in the past 12 months.	247	.06
	(12)	Number of staff injuries resulting from fires requiring medical treatment in the past 12 months.	0	
	divided by	The average daily population of staff in the past 12 months.	64	0
	(13)	Number of staff injuries (other than fire) requiring medical treatment in the past 12 months.	2	
	divided by	The average daily population of staff in the past 12 months.	64	.03
	(14)	Number of inmate lawsuits related to safety or sanitation found in favor of the inmate in the past 12 months.	0	
	divided by	The number of inmate lawsuits related to safety or sanitation in the past 12 months.	0	0
<b>1B</b>		<b>Vehicles are maintained and operated in a manner that prevents harm to the community, staff, contractors, volunteers, and inmates.</b>		
	(1)	Number of vehicle accidents resulting in property damage in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	247	0
	(2)	Number of vehicle accidents resulting in injuries requiring medical treatment for any party in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(3)	Amount dollar of damage from vehicle accidents in the past 12 months.	350	
	divided by	The average daily population in the past 12 months.	247	1.42
<b>1C</b>		<b>The number and severity of emergencies are minimized. When emergencies occur, the response minimizes the severity.</b>		
	(1)	Number of emergencies, caused by forces external to the facility, that result in property damage in the past 12 months.	0	
	divided by	The number emergencies.	7	0
	(2)	Number of injuries, caused by forces external to the facility, requiring medical attention that resulted from emergencies in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(3)	Number of times that normal facility operations were suspended due to emergencies caused by forces external to the facility in the past 12 months.	7	
	divided by	The average daily population in the past 12 months.	247	.03

	(4)	Number of hours that facility operations were suspended due to emergencies caused by forces external to the facility in the past 12 months.	19	
	divided by	The number of emergencies caused by forces external to the facility.	7	2.71
	(5)	Number of emergencies that were not caused by forces external to the facility that resulted in property damage in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(6)	Number of injuries requiring medical attention that resulted from emergencies that were not caused by forces external to the facility in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(7)	Number of times that normal facility operations were suspended due to emergencies that were not caused by forces external to the facility in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(8)	Number of hours that facility operations were suspended due to emergencies that were not caused by forces external to the facility in the past 12 months.	0	
	divided by	The number of emergencies.	7	0
	(9)	Number of injuries resulting from fires requiring medical treatment in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(10)	Number of fires that resulted in property damage in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(11)	Amount dollar of property damage from fire in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(12)	Number of code violations cited in the past 12 months.	16	
	divided by	The average daily population in the past 12 months.	247	.06
	(13)	Number of incidents involving toxic or caustic materials in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(14)	Number of incidents of inventory discrepancies in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0

2A	Outcome Measure	Numerator/Denominator	Value	Calculated O.M
		<b>The community, staff, contractors, volunteers, and inmates are protected from harm. Events that pose risk of harm are prevented. The number and severity of events are minimized.</b>		
	(1)	Number of incidents involving harm in the past 12 months.	58	
	divided by	The average daily population in the past 12 months.	247	.23
	(2)	Number of incidents in the past 12 months involving harm.	58	
	divided by	The number of admissions in the past 12 months.	4132	.01
	(3)	Number of physical injuries or emotional trauma requiring treatment as a result of incidents in the past 12 months.	31	
	divided by	The average daily population in the past 12 months.	247	.13
	(4)	Number of physical injuries or emotional trauma requiring treatment as a result of the incidents in the past 12 months.	31	
	divided by	The number of admissions in the past 12 months.	4132	.01
	(5)	Number of unauthorized inmate absences from the facility in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(6)	Number of instances of unauthorized access to the facility in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
<b>2B</b>		<b>Physical force is used only in instances of self-protection, protection of the inmate or others, prevention of property damage, or prevention of escape.</b>		
	(1)	Number of instances in which force was used in the past 12 months.	53	
	divided by	The average daily population in the past 12 months.	247	.21
	(2)	Number of instances in which force was used in the past 12 months.	53	
	divided by	The number of admissions in the past 12 months.	4132	.01
	(3)	Number of times that staff use of force were found to have been inappropriate in the past 12 months.	0	
	divided by	The number of instances in which force was used.	53	0
	(4)	Number of inmate grievances filed alleging inappropriate use of force in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	247	.004
	(5)	Number of grievances alleging inappropriate use of force decided in favor of inmate in the past 12 months.	0	
	divided by	The number of grievances alleging inappropriate use of force filed.	1	0
	(6)	Number of injuries requiring medical treatment resulting from staff use of force in the past 12 months.	12	
	divided by	The average daily population in the past 12 months.	247	.05

<b>2C</b>		<b>Contraband is minimized. It is detected when present in the facility.</b>		
	(1)	Number of incidents involving contraband in the past 12 months.	50	
	divided by	The average daily population in the past 12 months.	247	.20
	(2)	Number of incidents involving contraband in the past 12 months.	50	
	divided by	The number of admissions in the past 12 months.	4132	.01
	(3)	Number of weapons found in the facility in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	247	.004
	(4)	Number of controlled substances found in the facility in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	247	.004
	(5)	Number of controlled substances found in the facility in the past 12 months.	1	
	divided by	The number of admissions in the past 12 months.	4132	.0002
<b>2D</b>		<b>Improper access to and use of keys, tools and utensils are minimized.</b>		
	(1)	Number of incidents involving keys in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(2)	Number of incidents involving tools in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(3)	Number of incidents involving culinary equipment in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(4)	Number of incidents involving medical equipment and sharps in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
<b>3A</b>		<b>Inmates comply with rules and regulations.</b>		
	(1)	Number of rule violations in the past 12 months.	501	
	divided by	The average daily population in the past 12 months.	247	2.02
	(2)	Number of assaults—inmate against inmate, inmate against staff in the past 12 months.	29	
	divided by	The average daily population in the past 12 months.	247	.12
<b>4A</b>		<b>Food service provides a nutritionally balanced diet. Food service operations are hygienic and sanitary.</b>		
	(1)	Number of documented inmate illnesses attributed to food service operations in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(2)	Number of inmate grievances about food service decided in favor of the inmate the past 12 months.	7	
	divided by	The number of inmate grievances about food service in the past 12 months.	25	.07
	(3)	Number of violations cited by independent authorities for food service sanitation in the past 12 months.	8	
		Divided by number of violations cited by independent authorities in the past 12 months.	8	1
<b>4B</b>		<b>Inmates maintain acceptable personal hygiene practices.</b>		

	(1)	Inmate grievances regarding inmate access to personal hygiene decided in favor of the inmate in the past 12 months.	4	
	divided by	The average daily population in the past 12 months.	247	.02
	(2)	Number of inmate illnesses attributed to poor hygiene practices in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(3)	Number of inmates diagnosed with hygiene-related conditions (scabies, lice, or fungal infections) in the past 12 months.	7	
	divided by	The average daily population in the past 12 months.	247	.03
	(4)	Number of inmate grievances related to hygiene found in favor of the inmate in the past 12 months.	4	
	divided by	The number of inmate grievances related to hygiene in the past 12 months.	13	.31
	(5)	Number of inmate lawsuits related to hygiene found in favor of the inmate in the past 12 months.	0	
	divided by	The number of inmate lawsuits related to hygiene in the past 12 months.	0	0
<b>4C</b>		<b>Inmates maintain good health. Inmates have unimpeded access to a continuum of health care services so that their health care needs, including prevention and health education, are met in a timely and efficient manner.</b>		
	(1)	Number of inmates with a positive tuberculin skin test in the past 12 months.	45	
	divided by	The number of admissions in the past 12 months.	4132	.01
	(2)	Number of inmates diagnosed with active tuberculosis in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(3)	Number of conversions to a positive tuberculin skin test in the past 12 months.	0	
	divided by	The number of tuberculin skin tests given in the past 12 months.	1031	0
	(4)	Number of inmates with a positive tuberculin skin test who completed prophylaxis treatment for tuberculosis in the past 12 months.	1	
	divided by	The number of inmates with a positive tuberculin skin test on prophylaxis treatment for tuberculosis in the past 12 months.	1	1
	(5)	Number of Hepatitis C positive inmates in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	247	.004
	(6)	Number of HIV positive inmates in the past 12 months.	2	
	divided by	The average daily population in the past 12 months.	247	.01
	(7)	Number of HIV positive inmates who are being treated with highly active antiretroviral treatment in the past 12 months.	1	

	divided by	The number of known HIV positive inmates in the past 12 months.	2	.50
(8)		Number of inmates' diagnosis with an Axis I (excluding sole diagnosis of substance abuse) in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
(9)		Number of inmate suicide attempts in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	247	.004
(10)		Number of inmate suicides in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
(11)		Number of inmate deaths due to homicide in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
(12)		Number of inmate deaths due to injuries in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
(13)		Number of medically expected inmate deaths in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
(14)		Number of medically unexpected inmate deaths in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
(15)		Number of inmate admissions to the infirmary (where available) in the past 12 months.	1	
	divided by	The average daily population in the past 12 months.	247	.004
(16)		Number of inmate admissions to off-site hospitals in the past 12 months.	7	
	divided by	The average daily population in the past 12 months.	247	.03
(17)		Number of inmates transported off-site (via an ambulance or correctional vehicle) for treatment of emergency health conditions in the past 12 months.	33	
	divided by	The average daily population in the past 12 months.	247	.13
(18)		Number of inmate specialty consults completed in the past 12 months.	41	
	divided by	The number of specialty consults (on-site or off-site) ordered by primary health care provider (MD, NP, PA) in the past 12 months.	41	1
(19)		Number of inmate grievances about access to health care services found in favor of the inmate in the past 12 months.	0	
	divided by	The number of inmate grievances about access to healthcare services in the past 12 months.	41	0
(20)		Number of inmate grievances related to the quality of health care found in favor of inmates in the past 12 months.	2	
	divided by	The number of inmate grievances related to the quality of health care in the past 12 months.	22	.09
(21)		Number of inmates' lawsuits about access to healthcare services found in favor of inmates in the past 12 months.	0	

	divided by	The number of inmate's lawsuits about access to healthcare services in the past 12 months.	0	0
	(22)	Number of individual sick call encounters in the past 12 months.	2581	
	divided by	The average daily population in the past 12 months.	247	10.45
	(23)	Number of physician visits contacts in the past 12 months.	2978	
	divided by	The average daily population in the past 12 months.	247	12.06
	(24)	Number of individualized dental treatment plans in the past 12 months.	79	
	divided by	The average daily population in the past 12 months.	247	.32
	(25)	Number of hypertensive inmates enrolled in a chronic care clinic in the past 12 months.	243	
	divided by	The average daily population in the past 12 months.	247	.98
	(26)	Number of diabetic inmates enrolled in a chronic care clinic in the past 12 months.	76	
	divided by	The average daily population in the past 12 months.	247	.31
	(27)	Number of incidents involving pharmaceuticals as contraband in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	235	0
	(28)	Number of cardiac diets received by inmates with cardiac disease in the past 12 months.	0	
	divided by	The number of cardiac diets prescribed in the past 12 months.	0	0
	(29)	Number of hypertensive diets received by inmates with hypertension in the past 12 months.	108	
	divided by	The number of hypertensive diets prescribed in the past 12 months.	108	1
	(30)	Number of diabetic diets received by inmates with diabetes in the past 12 months.	76	
	divided by	The number of diabetic diets prescribed in the past 12 months.	76	1
	(31)	Number of renal diets received by inmates with renal disease in the past 12 months.	0	
	divided by	The number of renal diets prescribed in the past 12 months.	0	0
	(32)	Number of needle-stick injuries in the past 12 months.	0	
	divided by	The number of employees on average in the past 12 months.	8	0
	(33)	Number of pharmacy dispensing errors in the past 12 months.	0	
	divided by	The number of prescriptions dispensed by the pharmacy in the past 12 months.	4873	0
	(34)	Number of nursing medication administration errors in the past 12 months.	0	
	divided by	The number of medications administered in the past 12 months.	11,296	0

<b>4D</b>		<b>Health services are provided in a professionally acceptable manner. Staff are qualified, adequately trained, and demonstrate competency in their assigned duties.</b>		
	(1)	Number of staff with lapsed licensure and/or certification in the past 12 months.	0	
	divided by	The number of licensed or certified staff in the past 12 months.	11	0
	(2)	Number of new employees in the past 12 months who completed orientation training prior to undertaking job assignments.	2	
	divided by	The number of new employees in the past 12 months.	2	1
	(3)	Number of employees completing in-service training requirements in the past 12 months.	9	
	divided by	The number of employees eligible in the past 12 months.	9	1
	(4)	Number of MD staff who left employment in the past 12 months.	0	
	divided by	The number of authorized MD staff positions in the past 12 months.	1	0
	(5)	Number of RN staff who left employment in the past 12 months.	0	
	divided by	The number of authorized RN staff positions in the past 12 months.	2	0
	(6)	Number of LPN staff who left employment in the past 12 months.	1	
	divided by	The number of authorized LPN staff positions in the past 12 months.	6	.17
	(7)	Number of medical records staff who left employment in the past 12 months.	0	
	divided by	The number of medical records staff positions in the past 12 months.	0	0
	(8)	Number of alleged sexual misconduct incidents between staff and detainees in the past 12 months.	0	
	divided by	Average daily population in the past 12 months.	247	0
	(9)	Number of alleged sexual misconduct incidents between volunteers and/or contract personnel and detainees in the past 12 months.	0	
	divided by	Average daily population in the past 12 months.	247	0
	(10)	Number of confirmed sexual misconduct incidents between staff and detainees in the past 12 months.	0	
	divided by	Average daily population in the past 12 months.	247	0
	(11)	Number of confirmed sexual misconduct incidents between volunteers and/or contact personnel and detainees in the past 12 months.	0	
	divided by	Average daily population in the past 12 months.	247	0
	(12)	Number of detainees identified as high risk with a history of sexually assaultive behavior in the past 12 months.	61	
	divided by	Average daily population in the past 12 months.	247	.25
	(13)	Number of detainees identified as at risk for sexual victimization in the past 12 months.	108	
	divided by	Average daily population in the past 12 months.	247	.44
<b>5A</b>		<b>Inmates have opportunities to improve themselves while confined. There are no educational programs.</b>		

	(1)	Number of inmates who passed GED exams while confined in the past 12 months.		
	divided by	The number of inmates who were sentenced to the jail for 6 months or more in the past 12 months.		N/A
	(2)	Total number of grade levels advanced by inmates in the past 12 months.		
	divided by	The number of inmates who were sentenced to the jail for 6 months or more in the past 12 months.		N/A
	(3)	Number of certificates of vocational competency awarded to inmates in the past 12 months.		
	divided by	The number of inmates who were sentenced to the jail for 6 months or more in the past 12 months.		N/A
<b>5B</b>		<b>Inmates maintain ties with their families and the community.</b>		
		NONE		
<b>5C</b>		<b>The negative impact of confinement is reduced.</b>		
		NONE		
<b>6A</b>		<b>Inmates' rights are not violated.</b>		
	(1)	Total number of inmate grievances in the past 12 months, regarding: (a) access to court; (b) mail or correspondence; (c) sexual harassment; (d) discipline; (e) discrimination; (f) protection from harm.	62	
	divided by	The average daily population in the past 12 months.	247	.25
	(2)	Number of inmate grievances (see [a] through [e] above) decided in favor of inmates in the past 12 months.	8	
	divided by	The total number of grievances filed in the past 12 months.	504	.02
	(3)	Total number of inmate court suits alleging violation of inmate rights filed against the facility in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(4)	Number of inmate court suits alleging violation of inmate rights decided in favor of inmates in the past 12 months.	0	
	divided by	The total number of inmate suits filed in the past 12 months.	0	0
<b>6B</b>		<b>Inmates are treated fairly.</b>		
	(1)	Number of inmate grievances regarding discrimination in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
	(2)	Number of inmate grievances regarding discrimination resolved in favor of inmates in the past 12 months.	0	
	divided by	The total number of inmate grievances filed regarding discrimination in the past 12 months.	0	0
	(3)	Number of grievances resolved in favor of inmates in the past 12 months.	120	
	divided by	The average daily population in the past 12 months.	247	.48
	(4)	Number of grievances resolved in favor of inmates in the past 12 months.	120	
	divided by	The total number of inmate grievances filed in the past 12 months.	504	.24
	(5)	Number of court malpractice or tort liability cases found in favor of the inmate in the past 12 months.	0	

	divided by	The number of court malpractice or torte liability cases in the past 12 months.	0	0
<b>6C</b>		<b>Alleged rule violations are handled in a manner that provides inmates with appropriate procedural safeguards.</b>		
	(1)	Number of disciplinary incidents resolved informally in the past 12 months.	163	
	divided by	The average daily population in the past 12 months.	247	.66
	(2)	Number of formal inmate disciplinary decisions that were appealed in the past 12 months.	21	
	divided by	The total number of disciplinary decisions made in the past 12 months.	338	.06
	(3)	Number of appealed disciplinary decisions decided in favor of the inmate in the past 12 months.	4	
	divided by	The total number of disciplinary decisions made in the past 12 months.	338	.01
	(4)	Number of grievances filed by inmates challenging disciplinary procedures in the past 12 months.	37	
	divided by	The average daily population in the past 12 months.	247	.15
	(5)	Number of disciplinary-related grievances resolved in favor of the inmate in the past 12 months.	0	
	divided by	The total number of disciplinary-related grievances filed in the past 12 months.	37	0
	(6)	Number of court suits filed against the facility regarding discipline in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	235	0
	(7)	Number of court cases regarding discipline decided against the facility in the past 12 months.	0	
	divided by	The total number of court decisions regarding discipline decided in the past 12 months.	0	0
	(8)	Number of rule violations in the past 12 months.	501	
	divided by	The average daily population in the past 12 months.	247	2.02
	(9)	Number of inmates terminated from the facility due to rule violations in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0
<b>6D</b>		<b>Inmates take responsibility for their actions.</b>	N/A=	Do Not Track
	(1)	Number of inmates released in the past 12 months who made regular payments toward their restitution obligations.		
	divided by	The number of inmates who had restitution obligations in the past 12 months.		N/A
	(2)	Number of inmates who satisfy their court cost/fines obligations in the past 12 months.		
	divided by	The number of inmates who had court cost/fine obligations in the past 12 months.		N/A
	(3)	Total amount of restitution paid by inmates in the past 12 months.		
	divided by	The average daily population in the past 12 months.		N/A
	(4)	Total number of hours of community service donated by inmates in the past 12 months.	0	
	divided by	The average daily population in the past 12 months.	247	0

	(5)	Total number of inmates who participated in restitution in the past 12 months.		
	divided by	The total number of inmates housed in the past 12 months.		N/A
	(6)	Total number of inmates who participated in community service work in the past 12 months.	59	
	divided by	The total number of inmates housed in the past 12 months.	1058	.05
	(7)	Total number of inmates who participated in victim awareness programs in the past 12 months.		
	divided by	The total number of inmates housed in the past 12 months.		N/A
	(8)	Total amount of restitution paid by inmates in the past 12 months.		
	divided by	The total number of inmates housed in the past 12 months		N/A
	(9)	Total number of hours delivered by inmates who participated in community service work in the past 12 months.	6514	
	divided by	The total number of inmates housed in the past 12 months.	1058	6.15
<b>7A</b>		<b>The facility operates as a legal entity.</b>		
		NONE		
<b>7B</b>		<b>Staff, contractors, and volunteers demonstrate competency in their assigned duties.</b>		
	(1)	Total number of years of staff members' education as of the end of the last calendar year.	1448	
	divided by	The number of staff at the end of the last calendar year.	113	12.81
	(2)	Number of staff who left employment for any reason in the past 12 months.	27	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	120	.22
	(3)	Total number of credit hours in course relevant to their facility responsibilities earned by staff participating in higher education in the past 12 months.	532	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	120	4.43
	(4)	Number of professional development events attended by staff in the past 12 months.	17	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	120	.14
<b>7C</b>		<b>Staff, contractors, and volunteers are professional, ethical and accountable.</b>		
	(1)	Number of incidents in which staff was found to have acted in violation of facility policy in the past 12 months.	14	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	120	.12
	(2)	Number of staff terminated for conduct violations in the past 12 months.	2	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	120	.02
	(3)	Number of inmate grievances attributed to improper staff conducts which were upheld in the past 12 months.	9	

	divided by	The number of inmate grievances alleging improper staff conduct filed in the past 12 months.	110	.08
	(4)	Number of inmate grievances attributed to improper staff conduct which were upheld in the past 12 months.	9	
	divided by	The average daily population for the past 12 months.	247	.04
	(5)	Where staff is tested, the number of staff substance abuse tests failed in the past 12 months.	0	
	divided by	The number of staff substance abuse tests administered in the past 12 months.	3	0
	(6)	Number of staff terminations for violation of drug-free work policy in the past 12 months.	0	
	divided by	The number of staff terminations in the past 12 months.	5	0
	(7)	The average number of physicians employed in the past 12 months.	1	
	divided by	The number of physician positions authorized in the past 12 months.	1	1
	(8)	The average number of nurses employed in the past 12 months.	6	
	divided by	The number of nurse positions authorized in the past 12 months.	6	1
	(9)	The average number of mid-level health care practitioners employed in the past 12 months.	1	
	divided by	The number of mid-level health care practitioner positions authorized in the past 12 months.	1	1
	(10)	The average number of ancillary health care staff employed in the past 12 months.	0	
	divided by	The number of ancillary health care staff positions authorized in the past 12 months.	0	0
<b>7D</b>		<b>The facility is administered efficiently and responsibly.</b>		
	(1)	Net amount of budget shortfalls or <u>surplus</u> at the end of the last fiscal year (budget less expenditures). \$384,667	<	
	divided by	The budget for the past 12 months. \$7,794,438	<	.05
	(2)	Number of material audit findings by an independent financial auditor at the conclusion of the last audit.	0	
		NONE		
	(3)	Number of grievances filed by inmates regarding their records or property in the past 12 months.	12	
	divided by	The average daily population in the past 12 months.	247	.05
	(4)	Number of inmate grievances (records/property) decided in favor of inmates in the past 12 months.	2	
	divided by	The total number of inmate grievances (records/property) in the past 12 months.	12	.17
	(5)	Number of objectives achieved in the past 12 months.	4	
	divided by	The number of objectives for the past 12 months.	4	1
	(6)	Number of program changes made in the past 12 months.	0	
	divided by	The number of program changes recommended in the past 12 months.	0	0
	(7)	Number of problems identified by internal health care review that were corrected in the past 12 months.	3	
	divided by	The number of problems identified by internal health care review in the past 12 months.	3	1

<b>7E</b>		<b>Staff are treated fairly.</b>		
	(1)	Number of grievances filed by staff in the past 12 months.	0	
	divided by	The number of full-time equivalent staff positions in the past 12 months.	120	0
	(2)	Number of staff grievances decided in favor of staff in the past 12 months.	0	
	divided by	The total number of staff grievances in the past 12 months.	0	0
	(3)	Total number of years of staff members' experience in the field as of the end of the last calendar year.	531	
	divided by	The number of staff at the end of the last calendar year (e.g. average number of years experience).	113	4.70
	(4)	Number of staff termination or demotion hearings in which the facility decision was upheld in the past 12 months.	1	
	divided by	The number of staff termination or demotion hearings requested in the past 12 months.	0	0
<b>7F</b>		<b>The facility is a responsible member of the community.</b>		
	(1)	Total number of hours of volunteer service delivered by members of the community in the past 12 months.	1419	
	divided by	The average daily population of inmates in the past 12 months.	247	5.74
	(2)	Total number of individual community members who provided voluntary service in the past 12 months.	22	
	divided by	The average daily population of inmates in the past 12 months.	247	.09
	(3)	Total number of complaints filed by media regarding access to information in the past 12 months.	0	
	divided by	The average daily population of inmates in the past 12 months.	247	0
	(4)	Total number of positive statements made by media regarding the facility in the past 12 months.	3	
	divided by	The average daily population of inmates in the past 12 months.	247	.01
	(5)	Total number of complaints from the community in the past 12 months.	1	
	divided by	The average daily population of inmates in the past 12 months.	247	.004
	(6)	Total number of hours of community service work delivered by inmates in the past 12 months.	6514	
	divided by	The average daily population of inmates in the past 12 months.	247	26.37